

ISSUE SLIP STAFF AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	PS	64621	10/12
O.I.P.E. CLASSIFIER		49	12/15/79
FORMALITY REVIEW	DW	72316	10-20-99

INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral) Canceled A ..... Appeal  
 + ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	0	0	11/16/82
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If more than 150 claims or 10 actions  
 staple additional sheet here

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